
COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL,
CONTINUATION OR CIP)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type: (*check one applicable item below*)

☒ original

☐ design

NOTE: if the declaration is for an International Application being filed as a divisional, continuation or continuation-in-part application do not check any of next two items and check appropriate one of at last three items.

☒ national stage of PCT

☐ supplemental

NOTE: If one of the following 3 items apply then complete and also attach ADDED PAGES FOR DIVISIONAL , CONTINUATION OR CIP

☐ divisional

☐ continuation

☐ continuation-in-part

INVENTORSHIP IDENTIFICATION

WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted)

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (*if only one name is listed below*) or an original, first and joint inventor (*if plural names are listed below*) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

"BLUE EMITTING TRIS (8-OXOQUINOLINE) ALUMINUM (III) (Alq₃)"

SPECIFICATION IDENTIFICATION

the specification of which: (*complete (a), (b) or (c)*)

(a) ☒ is attached hereto.

(b) ☐ was filed on _____ as ☐ Serial No. _____
or ☐ Express Mail No. , as Serial No. not yet known _____
and was amended on _____ (*if applicable*).

NOTE: Amendments filed after the original papers are deposited with the PTO which contain new matter are not accorded a filing date by being referred to in the declaration. Accordingly, the amendments involved are those filed with the application papers or, in the case of a supplemental declaration, are those amendments claiming matter or encompassed in the statement of invention or claims. See 37 CFR 1.67.

(c) ☒ was described and claimed in PCT International Application No. **PCT/EP03/06197** filed on **June 12, 2003** and as amended under PCT Article 19 on _____ (if any).

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations § 1.56 (a).

☒ In compliance with this duty there is attached an information disclosure statement 37 CFR 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed.

(complete (d) or (e))

(d) ☐ no such applications have been filed.

(e) ☒ such applications have been filed as follows.

NOTE: Where item (c) is entered above and the International Application which designated the U.S. claimed priority check item (e), enter the details below and make the priority claim.

EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

COUNTRY	APPLICATION NUMBER	DATE OF FILING (month, day, year)	PRIORITY CLAIMED UNDER 37 USC 119
ITALY	MI2002A001330	JUNE 14, 2002	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
WIPO	PCT/EP03/06197	JUNE 12, 2003	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS (6 MONTHS FOR DESIGN) PRIOR TO THIS U.S. APPLICATION

POWER OF ATTORNEY

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (*List name and Registration number*)

Guido MODIANO (Reg. No. 19,928)
Albert JOSIF (Reg. No. 22,917)
Daniel J. O'BYRNE (Reg. No. 36,625)

SEND CORRESPONDENCE TO:

MODIANO & ASSOCIATI
Via Meravigli, 16
20123 MILANO - ITALY
EUROPE

DIRECT TELEPHONE CALLS TO:
(Name and telephone number)

MODIANO & ASSOCIATI
(+39) (02) 85.90.77.77

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true: and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such wilful false statements may jeopardize the validity of any patent issued thereon.

SIGNATURE(S)

100

Full name of sole or first inventor: Michele MUCCINI

Inventor's signature: _____

Date : November 29, 2004 Country of Citizenship: ITALY

Residence: BOLOGNA - ITALY

Post Office Address: Via P. Fabbri, 50 - 40138 BOLOGNA - ITALY

ITV

200

Full name of second or joint inventor, if any: Maria Antonietta LOI

Inventor's signature: _____

Date : November 29, 2004 Country of Citizenship: ITALY

Residence: QUARTU SANT'ELENA - ITALY ITV

Post Office Address: Via Benedetto Croce, 27 - 09045 QUARTU SANT'ELENA - ITALY

Full name of third or joint inventor, if any: ³⁰⁰ Norberto MASCIOCCHI
Inventor's signature: Norberto Masciocchi
Date : November 29, 2004 Country of Citizenship: ITALY
Residence: COMO – ITALY
Post Office Address: Via Palestro, 9 – 22100 COMO – ITALY
ITX

Full name of third or joint inventor, if any: ⁴⁰⁰ Angelo SIRONI
Inventor's signature: Angelo Sironi
Date : November 29, 2004 Country of Citizenship: ITALY
Residence: MILANO – ITALY
Post Office Address: Via Settembrini, 46 – 20124 MILANO – ITALY
ITX

*CHECK PROPER BOX(ES) IF ANY OF THE FOLLOWING ADDED PAGE(S) FORM A
PART OF THIS DECLARATION*

☐ Signature for third and subsequent joint inventors. Number of pages added _____ .

☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added _____ .

☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added _____ .

* * *

☐ Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.

☐ Number of pages added _____ .

* * *

If no further pages form a part of this Declaration then end this Declaration with this page and check the following item.

☒ This declaration ends with this page.

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(e) & 1.27(d)) –NONPROFIT ORGANIZATION

Docket Number (Optional):
39714/GM/lp

Applicant or Patentee: **Michele MUCCINI, Maria Antonietta LOI, Norberto MASCIOCCHI, Angelo SIRONI**

Application or Patent N°.: _____

Filing date or Issue date: _____

Title: **"BLUE EMITTING TRIS (8-OXOQUINOLINE) ALUMINUM (III) (AIQ3)"**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF NONPROFIT ORGANIZATION: **UNIVERSITÀ DEGLI STUDI DELL'INSUBRIA**

ADDRESS OF NONPROFIT ORGANIZATION: **Via Ravasi, 2 – 21100 VARESE – ITALY**

TYPE OF NONPROFIT ORGANIZATION:

- ☒ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3))
☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES
OF AMERICA (NAME OF STATE _____)
(CITATION OF STATUTE _____)
☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA
☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE : _____)
(CITATION OF STATUTE _____)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- ☒ the specification filed herewith with title as listed above.
☐ the application identified above.
☐ the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization regarding the above identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights in the invention must file separate verified statements averring to their status as small entities and that no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). Each person, concern or organization having any rights in the invention is listed below:

- ☐ No such person, concern, or organization exists.
☒ Each such person, concern or organization is listed below:
- CONSIGLIO NAZIONALE DELLE RICERCHE
- UNIVERSITÀ DEGLI STUDI DI MILANO

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: **Renzo DIONIGI**

TITLE IN ORGANIZATION OF PERSON SIGNING: **Rector**

ADDRESS OF PERSON SIGNING: **Via Ravasi, 2 – 21100 VARESE – ITALY**

SIGNATURE:  DATE: **November 29, 2004**

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(e) & 1.27(d)) –NONPROFIT ORGANIZATION

Docket Number (Optional):
39714/GM/lp

Applicant or Patentee: **Michele MUCCINI, Maria Antonietta LOI, Norberto MASCIOCCHI, Angelo SIRONI**

Application or Patent N°.: _____

Filing date or Issue date: _____

Title: **"BLUE EMITTING TRIS (8-OXOQUINOLINE) ALUMINUM (III) (AIQ3)"**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

NAME OF NONPROFIT ORGANIZATION: **CONSIGLIO NAZIONALE DELLE RICERCHE**

ADDRESS OF NONPROFIT ORGANIZATION: **Piazzale Aldo Moro, 7 – 00185 ROMA – ITALY**

TYPE OF NONPROFIT ORGANIZATION:

- ☐ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
- ☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3))
- ☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES
OF AMERICA (NAME OF STATE _____)
(CITATION OF STATUTE _____)
- ☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA
- ☒ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE : **ITALY**)
(CITATION OF STATUTE **ITALIAN NATIONAL RESEARCH CENTER**)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 CFR 1.9(e) for purposes of paying reduced fees to the United States Patent and Trademark Office regarding the invention described in:

- ☒ the specification filed herewith with title as listed above.
- ☐ the application identified above.
- ☐ the patent identified above.

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization regarding the above identified invention. If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights in the invention must file separate verified statements averring to their status as small entities and that no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c) if that person made the invention, or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). Each person, concern or organization having any rights in the invention is listed below:

- ☐ No such person, concern, or organization exists.
- ☒ Each such person, concern or organization is listed below:

- UNIVERSITÀ DEGLI STUDI DI MILANO

- UNIVERSITÀ DEGLI STUDI DELL'INSUBRIA

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

NAME OF PERSON SIGNING: **Fabrizio TUZI**

TITLE IN ORGANIZATION OF PERSON SIGNING: **Head of the Patent Department**

ADDRESS OF PERSON SIGNING: **Piazzale Aldo Moro, 7 - 00185 ROMA - ITALY**

SIGNATURE:  DATE: **November 29, 2004**

VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(e) & 1.27(d)) –NONPROFIT ORGANIZATION

Docket Number (Optional):
39714/GM/lp

Applicant or Patentee: **Michele MUCCINI, Maria Antonietta LOI, Norberto MASCIOCCHI, Angelo SIRONI**

Application or Patent N°.: _____

Filing date or Issue date: _____

Title: **"BLUE EMITTING TRIS (8-OXOQUINOLINE) ALUMINUM (III) (AlQ3)"**

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NAME OF NONPROFIT ORGANIZATION: **UNIVERSITÀ DEGLI STUDI DI MILANO**

ADDRESS OF NONPROFIT ORGANIZATION: **Via Festa del Perdono, 7 – 20122 MILANO – ITALY**

TYPE OF NONPROFIT ORGANIZATION:

- ☒ UNIVERSITY OR OTHER INSTITUTION OF HIGHER EDUCATION
☐ TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and 501(c)(3))
☐ NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF THE UNITED STATES
OF AMERICA (NAME OF STATE)
(CITATION OF STATUTE)
☐ WOULD QUALIFY AS TAX EXEMPT UNDER INTERNAL REVENUE SERVICE CODE (26 U.S.C. 501(a) and
501(c)(3)) IF LOCATED IN THE UNITED STATES OF AMERICA
☐ WOULD QUALIFY AS NONPROFIT SCIENTIFIC OR EDUCATIONAL UNDER STATUTE OF STATE OF
THE UNITED STATES OF AMERICA IF LOCATED IN THE UNITED STATES OF AMERICA
(NAME OF STATE :)
(CITATION OF STATUTE)

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- ☒ the specification filed herewith with title as listed above.
☐ the application identified above.
☐ the patent identified above.

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- ☐ No such person, concern, or organization exists.
☒ Each such person, concern or organization is listed below:

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- UNIVERSITÀ DEGLI STUDI DELL'INSUBRIA

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NAME OF PERSON SIGNING: **Enrico DECLEVA**

TITLE IN ORGANIZATION OF PERSON SIGNING: **Rector**

ADDRESS OF PERSON SIGNING: **Via Festa del Perdono, 7 - 20122 MILANO - ITALY**

SIGNATURE: **IL RETTORE**
Enrico Decleva
[Signature]

DATE: **November 29, 2004**